Department of Alcoholic Beverage Control

CATERING OR EVENT AUTHORIZATION APPLICATION

Please read instructions before completing form.			LICENSE NUMBE	н	
		RECEIPT NUMBER			
			TOTAL FEE (\$40.	200 m and days	
			TOTAL FEE (\$10.9	ou per day)	
SECTION 1			\$		
LICENSEE NAME (Last, first, middle)	2. COM	NTACT PERSON		3. CONTACT PHONE NUMBER	
				()	
4. LICENSED PREMISES ADDRESS	5. MAI	5. MAILING ADDRESS (IF DIFFERENT)			
6. EVENT LOCATION (Street number and name, city, zip code)					
7 DESCRIPTION OF LOCATION (Parking let office building residence countyleity park, etc.)					
7. DESCRIPTION OF LOCATION (Parking lot, office building, residence, county/city park, etc.)					
8. EVENT LOCATION IS WITHIN THE CITY LIMITS 9. EVENT DA	TE(S)		10. TOTAL NUME	BER OF DAY(S)	
Yes No	,			. ,	
	PEN TO THE PUBLIC		13. ESTIMATED	ATTENDANCE	
From To \Yes	No				
SECTION 2 CATE	RING EVENT		15 NUMBER OF	EVENTS CATERED THIS YEAR	
	Gathering			ON (Not applicable to club licensees)	
Sporting Event Picnic Wedo	ing E	Birthday			
Other					
16. ORGANIZATION SPONSORING EVENT 17. PERSON IN CHARGE		ERSON IN CHARGE OF	OF EVENT		
18. MAILING ADDRESS 19. PHONE NUM		HONE NUMBER OF AB	OF ABOVE PERSON		
OF OTION O	LAGENT PROPER) T)/			
SECTION 3 EVENT ON AD 20. CALENDAR QUARTER (Limit is one event per quarter)	JACENT PROPER		21 NUMBER OF	EVENTS ALREADY HELD THIS	
	July 1 - September 30		YEAR AT THIS LO		
April 1 - June 30	October 1 - December 31				
22. LOCAL LAW ENFORCEMENT AGENCY APPROVAL SIGNATURE 23. TITLE			24. DATE SIGNE)	
SECTION 4					
SECTION 4					
I declare under penalty of perjury that to the best of n	y knowledge these sta	itements are t	rue and co	rrect.	
LICENSEE SIGNATURE			DATE SIGNED		
SECTION 5 AUTHORIZATION (For ABC Use Only)					
PROPERTY OWNER APPROVAL REQUIRED CONDITIONS/ACKNOWLEDGMENTS REQUIRED Yes, attached No Yes, attached No			LAW ENFORCEM	NO NO	
DISTRICT APPROVAL BY (Name) ABC EMPLOY	EE SIGNATURE		DATE SIGNED		